

**VILLAGE OF SLEEPY HOLLOW  
APPLICATION FOR AMUSEMENT DEVICE PERMIT**

Name and address of owner and person upon whose premises the amusement device shall be kept, maintained, used, exhibited or operated: \_\_\_\_\_

\_\_\_\_\_.

Name and address of manufacturer: \_\_\_\_\_

\_\_\_\_\_.

Manufacturer's device number (if any): \_\_\_\_\_

\_\_\_\_\_.

Detailed description of amusement device, including all mechanical features: \_\_\_\_\_

\_\_\_\_\_.

Location by street and number where amusement device is to be located, including tax map section, block and lot: \_\_\_\_\_

\_\_\_\_\_.

Nature and use of premises upon which amusement device is proposed to be kept, maintained, exhibited, used or operated: \_\_\_\_\_

\_\_\_\_\_.

Number of amusement devices presently licensed and sought to be licensed upon the same premises: \_\_\_\_\_ **NOTE:** No premises shall maintain more than three (3) such devices.

Has applicant ever made previous applications in Sleepy Hollow? \_\_\_\_\_.

Has any license of applicant been received, refused, suspended or revoked? If yes, what were the circumstances? \_\_\_\_\_

\_\_\_\_\_.

Has applicant, or if a corporation, any officer thereof, ever been convicted of a crime? If yes, give date, place and other circumstances: \_\_\_\_\_

\_\_\_\_\_.

The applicant herein has read all of the terms and conditions of Sleepy Hollow Local Law entitled "Amusement Devices" and affirm that they will comply in all respects.

The applicant affirms under penalty of perjury pursuant to the C.P.L.R. of the State of New York that all of the information contained in the foregoing application is true and correct in all respects.

Fee\_\_\_\_\_

\_\_\_\_\_  
Signature of Owner of Device

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
Signature of Owner of Premises